PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

IBM CORP (Y C/O YEE & AS P.O. BOX 8023 DALLAS, TX 7	7590 11/21 'A) SOCIATES PC 33		Fed pape have	s) Transmittal. This ceners. Each additional paper its own certificate of m	tificate cannot be used to er, such as an assignmentalling or transmission.	or domestic mailings of the or any other accompanying int or formal drawing, must mission g deposited with the United st class mail in an envelope above, or being facsimile ate indicated below. (Depositor's name) (Signature)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR	TTA	ATTORNEY DOCKET NO. CONFIRMATION NO.	
09/726,014 11/29/2000		David William Cole		\$9-2000-0489-US1	9664	
TITLE OF INVENTION		TEMS MANAGEMENT	REALIZING END-TO		SYSTEMS MANA	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	02/21/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS			
NAHAR, QAMRUN		2191	717-101000	•		
"Fee Address" ind PTO/SB/47; Rev 03-1 Number is required. 3. ASSIGNEE NAME A	ND RESIDENCE DATA	"Indication form ned. Use of a Customer A TO BE PRINTED ON	or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent attornisted, no name will be THE PATENT (print or type)	3 registered patent atto- vely, e firm (having as a mem gent) and the names of meys or agents. If no na printed.	ober a 2 David up to ume is 3 Theod	d A. Mims, Jore D. Fay I ocument has been filed for 33 898447 89726814
(A) NAME OF ASSI Interna	chional Bu	Isiness	(B) RESIDENCE: (CITY Armol	and STATE OR COUNTY 1501	1400.00 D 300.00 D	A A
			4b. Payment of Fee(s): (Please first reapply any previously paid Issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (April 2014).			
a. Applicant claim	tus (from status indicate is SMALL ENTITY state d Publication Fee (if req records of the United Sta	us. See 37 CFR 1.27.	b. Applicant is no long	ger claiming SMALL E	NTITY status. See 37 C	
Authorized Signature	Shal	H Clanza	2/	Date	25 035	

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Palent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.